



**LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL**

**BOARD OF DIRECTORS**

**MEETING MINUTES**

**June 3, 2025**

**Zoom | ACR**

A meeting of the Board of Directors of the Lennox and Addington County General Hospital (LACGH) was held in the Airhart Conference Room and via Zoom at 6:30 p.m. on June 3, 2025.

**PRESENT:**

<b>Board:</b> Deb Lowry (Chair)	Mike Bell
Allan MacGregor	Christine Wilkinson
Bob Clancey	Dr. Kim Morrison
Norm Clark	Kelly Roantree
Geoff Griffin	Susan Jack
Jamie Uson	Dr. Heather Khey Beldman
Rosaleen Cutler	
Rebecca Murphy	
Al Little	
Lori Morris	
Robin Thompson McAvoy	

**REGRETS:**

Laurie French

<b>Staff in attendance:</b> Erin Brown	AK Sharma
Mary Lou Toop	Sandra Carlton
	Andrea Nussberger (Recorder)

**1. Meeting Opening**

**1.1 Call to Order/Opening Remarks**

The meeting was called to order at 6:30 p.m., by Deb Lowry. Deb welcomed Susan Jack, Past President of the Volunteer Services to the meeting who attended on behalf of Marg Isbester.

Deb extended, on behalf of the Board, sincere appreciation to Kelly Roantree, Chair of the Foundation Board, and Marg Isbester, President of Volunteer Services, for their dedicated service and valuable contributions to the hospital throughout their terms.

Deb reported that she attended an Ontario Hospital Association (OHA) education session on May 29th, focused on the financial pressures facing the hospital sector, and noted that the outlook presented was concerning. The OHA shared that the Ministry of Health has developed a Hospital Sector Stabilization Plan (HSSP), outlining a proposed path forward for the 2025–26 fiscal year. Mike will speak to this in agenda item 2.1.

**1.2 Land Acknowledgement**

Deb Lowry started the meeting with the following Land Acknowledgment:

*We acknowledge that Lennox and Addington County General Hospital is built on the ancestral and traditional territory of the Anishinaabeg and Haudenosaunee Peoples, including the Mohawks of the Bay of Quinte, and on the land of the Huron-Wendat Nation. As the LACGH*



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

BOARD OF DIRECTORS  
MEETING MINUTES

June 3, 2025  
Zoom | ACR

*Board of Directors, we are dedicated to honouring Indigenous history and culture, and are committed to moving forward in the spirit of reconciliation and respect.*

**1.3 Approval of the Agenda**

The agenda was approved as circulated

Motion #1

*Rationale: Normal Practice*

---

**Motion: That the Board of Directors hereby approves the agenda dated June 3, 2025.**

Moved by: Rebecca Murphy  
Seconded by: Lori Morris

The motion was carried.

**1.4 Conflict of Interest**

The Chair inquired if any Board member wished to declare a conflict of interest based on items identified on the Agenda. There were no identified conflicts of interest.

**1.5 Approval of Previous Board Meeting Minutes**

The minutes of the previous meeting were approved as circulated.

Motion #2

*Rationale: Normal Practice*

---

**Motion: That the Board of Directors hereby approves the minutes of the previous meeting dated May 6, 2025.**

Moved by: Allan MacGregor  
Seconded by: Rosaleen Cutler

The motion was carried.

**2. Business Arising**

**2.1 Regional Updates**

Mike Bell reported on the following items:

- At the recent OHA Conference, the Brockville Board Chair indicated that they were interested in resuming the former Southeast Hospital Board Chair forum meetings. Meeting invites should be received soon.

Dr. Kim Morrison reported on the following items:

- The Lumeo Steering Committee continues to meet monthly, and progress is being made to remedy errors in Cerner.

Mike Bell provided an update based on a recent OHA Member Call regarding the Ministry of Health (MOH) Hospital Sector Leadership Update. Key highlights included:



# LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

## BOARD OF DIRECTORS

### MEETING MINUTES

June 3, 2025

Zoom | ACR

---

- The Ministry of Health presented the Hospital Sector Stabilization Plan (HSSP), acknowledging ongoing financial pressures in the hospital sector. The HSSP frames 2025–26 as a “reset year” following three years of COVID-19 and two subsequent recovery years. The plan outlines that the Ministry will be looking at governance best practices and accountability across the sector.
- The Ministry outlined funding allocations for the upcoming fiscal year and announced plans for a comprehensive review to better understand the root causes of current financial challenges. A key focus will be on promoting greater consistency and standardization across the hospital sector.
- The Ministry also emphasized the need to better understand Long-Term Care (LTC) budgets within hospitals that subsidize LTC homes.
- It was further noted that three Ontario hospitals are currently under supervision, highlighting the severity of the situation. The Ministry reiterated its commitment to treating this year as a true reset, with the goal of achieving a balanced budget over the next two fiscal years.

#### 2.2 Capital Projects Update

AK Sharma reported on the following items:

- The LTC build remains under budget.
- Ongoing work includes interior finishes such as flooring, T-bar ceilings, and related construction activities.
- Exterior work and civil infrastructure have commenced and will be followed by landscaping.
- The electrical panels, originally expected to arrive in August, have now arrived ahead of schedule.

### 3. Reports

#### 3.1 Quality Committee

Rosaleen Cutler highlighted the following from the May 20, 2025 Quality Committee meeting:

- Anna Huisman, Pharmacy Director, presented the bi-annual Medication Management Report. A key highlight was that drug shortages are beginning to decline, indicating improvement in supply chain stability.
- The Patient Feedback Report was reviewed, noting that a number of complaints pertain to care, treatment, communication, and staff attitude. The Committee acknowledged that efforts are underway to identify root causes and implement strategies for service improvement.
- A new BSC/QIP reporting format was introduced to better align with the upcoming 2025–2028 Strategic Plan. The Committee agreed that the new format will enhance trend tracking and overall usability.
- Ibrahim Khalil, Information Systems Manager, delivered the annual IT Security Report. It was reported that the hospital has transitioned to a new cybersecurity provider, now supported by a local delivery group led by The Ottawa Hospital.

#### 3.2 Medical Advisory Committee

Dr. Kim Morrison highlighted the following from the May 8, 2025, Medical Advisory Committee meeting, which was chaired by Dr. Warren:



# LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

## BOARD OF DIRECTORS

### MEETING MINUTES

June 3, 2025

Zoom | ACR

- Anna Huisman, Pharmacy Director, presented the Medication Safety/Pharmacy & Therapeutics Report. It was highlighted that the annual formulary review will be removed from the MAC workplan as this work is now being done at a regional level through Lumeo.

The Board had a brief discussion regarding concerns that Lumeo is listed as the reason for 28% of medication incidents. It was highlighted that the reason for these incidents is multifaceted whether it be due to the learning curve associated with a new system, Cerner default settings, order set errors. It was noted that some Lumeo related incidents may not be captured. Ongoing efforts are being made by Lumeo to correct errors via their priority matrix.

The Medical Advisory Committee reviewed the re-appointment applications to the LACGH Medical Staff for the following:

- Heather Khey Beldman – Active (Family Medicine)
- Max Pang – Associate (Family Medicine)
- Elizabeth Touzel – Active (Family Medicine)
- Daniel Curran – Active (Family Medicine with Emergency)
- Patricia Hoyeck – Locum Tenens (Family Medicine)
- Aaron McGregor – Active (Family Medicine)
- Stephanie Vanner – Locum Tenens (Family Medicine)
- Sonal Patel – Active (Family Medicine)
- Robin Britton – Active (Family Medicine)

#### Motion #3

*Rationale: Applications for appointment to the Medical Staff require the review and approval of the Medical Advisory Committee and the Board of Directors.*

***Motion: The Board of Directors hereby approves the following re-appointments to the LACGH Medical Staff, as recommended by the Medical Advisory Committee:***

- Heather Khey Beldman – Active (Family Medicine)
- Max Pang – Associate (Family Medicine)
- Elizabeth Touzel – Active (Family Medicine)
- Daniel Curran – Active (Family Medicine with Emergency)
- Patricia Hoyeck – Locum Tenens (Family Medicine)
- Aaron McGregor – Active (Family Medicine)
- Stephanie Vanner – Locum Tenens (Family Medicine)
- Sonal Patel – Active (Family Medicine)
- Robin Britton – Active (Family Medicine)

Moved by: Geoff Griffin

Seconded by: Allan MacGregor

The motion was carried.

The Medical Advisory Committee reviewed the re-appointment applications, with the noted changes, to the LACGH Medical Staff for the following:



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

BOARD OF DIRECTORS  
MEETING MINUTES

June 3, 2025  
Zoom | ACR

- Tom Touzel – Clinical Assistant (OR Assist Only) **change from Active**
- Tiahna Warkentin – Locum Tenens (Emergency Medicine) **change from clinical assistant**

No concerns were noted by the MAC; therefore, the re-appointment applications, with the noted changes, were recommended to the Board of Directors for approval. The Board reviewed the credentialing applications and no concerns were noted.

Motion #4

*Rationale: Applications for appointment to the Medical Staff require the review and approval of the Medical Advisory Committee and the Board of Directors.*

---

**Motion: The Board of Directors hereby approves the following appointment to the LACGH Medical Staff, with the noted change, as recommended by the Medical Advisory Committee:**

- Tom Touzel – Clinical Assistant (OR Assist Only) **change from Active**
- Tiahna Warkentin – Locum Tenens (Emergency Medicine) **change from clinical assistant**

Moved by: Bob Clancey  
Seconded by: Lori Morris

The motion was carried.

The Medical Advisory Committee reviewed the appointment applications to the LACGH Medical Staff for the following:

- Martha Briggs - Clinical Assistant (General Surgery)
- Lorraine Hart - Locum Tenens (Internal Medicine)

No concerns were noted by the MAC; therefore, the appointment applications were recommended to the Board of Directors for approval. The Board reviewed the credentialing applications and no concerns were noted.

Motion #5

*Rationale: Applications for appointment to the Medical Staff require the review and approval of the Medical Advisory Committee and the Board of Directors.*

---

**Motion: The Board of Directors hereby approves the following appointments to the LACGH Medical Staff, as recommended by the Medical Advisory Committee:**

- Martha Briggs - Clinical Assistant (General Surgery)
- Lorraine Hart - Locum Tenens (Internal Medicine)

Moved by: Rebecca Murphy  
Seconded by: Geoff Griffin

The motion was carried.

**3.3 Governance Committee**

Rebecca Murphy, in Laurie French’s absence, reviewed the following from the May 14, 2025, Governance Committee meeting:



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

BOARD OF DIRECTORS

MEETING MINUTES

June 3, 2025

Zoom | ACR

- The Committee reviewed the proposed Governance Action Plan presented by Erin Brown in response to the results of the survey completed. The Committee agreed that a work group would be formed to review sample frameworks for an action plan in response to the areas identified; predominantly related to Indigenous-specific and systemic racism.
- The revised draft Meeting Procedures Policy was discussed with a few additions – includes extensive Rules of Procedure intentionally as an Appendix as a support in the event there is a need. Rebecca noted one edit to the draft policy included in the meeting package – item #34 should read *Only Board Members and invited participants may attend closed sessions*.
- There was a Board Director recruitment update – the Nominating Committee proceeded with public advertisements that netted 10 very strong applications. Interviews will be conducted for a short list of 5 candidates to bring recommendations to the June Board meeting.
- There was a discussion on the retreat format and location – the Committee agreed on the same schedule, however, Andrea will look into a more local venue.
- The risk mitigation report was presented by Justin Turner. Reviewing insurance was the only ‘red’ indicator as a result of timing. The schedule will be re-aligned to reflect fiscal year tracking and reporting, as well as QIP.

Motion #6

*Rationale: Normal Practice*

***Motion: The Board of Directors hereby approves the amended Board of Director Meeting Policy B-33, as recommended by the Governance Committee.***

Moved by: Lori Morris

Seconded by: Rebecca Murphy

The motion was carried.

**3.4 Nominating Committee**

Geoff Griffin highlighted the following on behalf of the Nominating Committee:

- The Nominating Committee received a strong response to its advertisement in the local newspapers seeking new Board members.
- A total of ten applications were received; two applicants were ineligible.
- The applicant pool included highly skilled individuals from a range of backgrounds.
- Following a screening process, the Committee shortlisted five candidates for interviews.
- Based on the interviews, the Nominating Committee recommended the following three candidates to the Board:
  - Tera Osborne
  - Darrell Sewell
  - Susan Walden



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

BOARD OF DIRECTORS  
MEETING MINUTES

June 3, 2025  
Zoom | ACR

Motion #7

*Rationale: The Nominating Committee oversees the Board recruitment and nomination process which includes recommending candidates to the Board for election at the annual meeting.*

**Motion: The Board of Directors hereby approves the following names to be put forward for nomination to the Board of Directors at the June 17, 2025, Annual Meeting, as recommended by the Nominating Committee:**

- **Tera Osborne**
- **Darrell Sewell**
- **Susan Walden**

Moved by: Jamie Uson  
Seconded by: Robin Thompson McAvoy

The motion was carried.

**3.5 Finance Committee**

Jamie Uson reviewed the following from the May 26, 2025, Finance Committee meeting:

- The LTC build and Lumeo debt combined is \$39.5M with accrued interest of \$2M; the interest will be added to the total loan amount in the next fiscal.
- The investments are showing a minor year-to-date loss of around 2.5%.
- The Committee reviewed the CEO expenses listed in item 3.5.1, which are an accumulation of travel expenses from November to March.

3.5.1 Board, CEO and Senior Manager Expenses

The Finance Committee reviewed the Board, CEO, and Senior Management Expenses for March 2025 which totaled \$801.14. The Finance Committee recommends to the Board that the following expenses be approved:

Motion #8

*Rationale: The Broader Public Sector Accountability Act requires that the expenses of the Board, CEO and Senior Management be reviewed and/or approved by the Board.*

**Motion: The Board of Directors hereby approves the following Board, CEO and Senior Management Expenses which totaled \$801.14, as recommended by the Finance Committee.**

**2025**

Name	Meals	Hospitality	Accommodation	Vehicle Rental/Own Used Mileage	Incidentals (Parking, tolls, etc.)	Fares	Total
Mike Bell	40.57			710.98	49.59		801.14
<b>TOTAL</b>							<b>\$801.14</b>

Moved by: Rosaleen Cutler  
Seconded by: Lori Morris

The motion was carried.



# LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

## BOARD OF DIRECTORS

### MEETING MINUTES

June 3, 2025

Zoom | ACR

#### 3.5.2 Broader Public Sector Accountability Act (BPSAA)

The Finance Committee reviewed the BPSAA Hospital Attestation and Hospital Use of Consultants for the 2024-25 fiscal year:

- It was confirmed that no issues were identified.
- The Committee concluded that the hospital is in compliance with the Broader Public Sector Accountability Act.

#### Motion #9

*Rationale: Under the Broader Public Sector Accountability Act (BPSAA), the hospital is required to review and prepare attestations with respect to compliance with the requirements confirming:*

- *completion and accuracy of reports on the use of consultants;*
- *compliance with the prohibition on engaging lobbyist services using public funds;*
- *compliance with the expense claim directives issued by the government;*
- *compliance with any applicable perquisite directive issued by the government;*
- *compliance with procurement directives issued by the government;*
- *compliance with preparation and publication of business plans and other business or financial report documents.*

**Motion: The Board of Directors hereby approves the Attestation Compliance Report, as recommended by the Finance Committee.**

Moved by: Rebecca Murphy

Seconded by: Allan MacGregor

The motion was carried.

#### 3.6 Audit Committee

Jamie Uson reviewed the following from the May 26, 2025 Audit Committee meeting:

- Katie Mahon, KPMG attended the meeting and presented a clean audit report summary.
- The 2024-25 fiscal year ended with \$1.5M in surplus.
- We did not meet our ratio target, however, this is due to current LTC debt which will be converted to a long-term loan within the next year.
- The audit focused on the LTC build and the Lumeo project, with no exceptions noted.
- There were two small uncorrected misstatements; WSIB surplus classification and interest capitalization timing.
- The Committee recommended that KPMG be reappointed as the auditor on record for 2025-26.

Jamie highlighted and thanked Mary Lou, Caroline and the finance team for their hard work during the audit.



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

BOARD OF DIRECTORS  
MEETING MINUTES

June 3, 2025  
Zoom | ACR

Motion #10

*Rationale: Normal Practice*

**Motion The Board of Directors hereby approves the Year End Audit Findings Report and the Draft Financial Statements for the year ending March 31, 2025, as recommended by the Audit Committee.**

Moved by: Geoff Griffin  
Seconded by: Allan MacGregor

The motion was carried.

Motion #11

*Rationale: Normal Practice*

**Motion The Board of Directors hereby approves the appointment of KPMG as the external auditors on record for 2025-26, as recommended by the Audit Committee.**

Moved by: Bob Clancey  
Seconded by: Lori Morris

The motion was carried.

**3.7 Volunteer Services Report**

The Volunteer Services Report, submitted by Marg Isbester, was included in the meeting package for review. On behalf of Volunteer Services, Susan Jack expressed heartfelt appreciation to Deb Lowry, Al MacGregor, and Norm Clark—all outgoing Board members—for the support and encouragement they have provided to the volunteers over the years. Their contributions were sincerely acknowledged and greatly valued.

**3.8 Foundation Report**

Kelly Roantree highlighted the following from her written report:

- The Tim Hortons Smile Cookie Campaign raised a record-breaking \$46,269.07 in support of the Emergency Department at LACGH.
- The Ride for DI event went well with 115 riders participating. The event raised approximately \$34,000.
- Three Foundation board members and one staff member attended the Association for Healthcare Philanthropy’s 2025 Convene Canada Conference held in Ottawa at the end of May. There were many great workshops with one common theme of engaging physicians or having a physician on Foundation Boards.
- The Foundation audit process is underway and the Annual Meeting is booked for the end of June.
- One grateful patient story was shared.

**3.9 Chief Executive Officer’s Report**

Further to the written report provided in the Board package, Mike Bell shared the following information:



# LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

## BOARD OF DIRECTORS

### MEETING MINUTES

June 3, 2025

Zoom | ACR

---

#### 1. Lumeo Implementation

- Despite the ongoing challenges and adjustments associated with Lumeo, Mike emphasized that Lumeo remains a positive advancement for the region.
- A key issue highlighted in the written report is the difficulty in extracting usable data across the region.
  - Both regional and local teams are actively working to address and resolve this challenge.

#### 2. Leadership Recruitment

- Two new Clinical Managers have been successfully hired and are currently undergoing the onboarding process.
- The remaining middle management vacancies have been posted and are actively being recruited.

#### 3. Catalysis Quality Improvement Initiative

- The Catalysis quality improvement work is well underway, with a targeted focus on:
  - Emergency Department (ED)
  - Diagnostic Imaging (DI)
  - Patient flow to the Ambulatory Care Unit (ACU)
- Several tools and methodologies from the Catalysis program have already been implemented through daily huddles and structured project plans.
- Staff feedback has been very positive, noting that the system is beginning to address long-standing ideas and concerns for improvement.
- From a governance perspective, Mike suggested it would be beneficial for Board members to see the work in action. A tour of the focus areas is being planned for the near future.

#### 4. Strategic Plan Launch

- The 2025–2028 Strategic Plan is scheduled for its official launch on June 23, during the upcoming staff townhall meeting.

Motion #12

*Rationale: Normal Practice*

***Motion: The Board of Directors hereby accepts the reports from the Quality Committee, Medical Advisory Committee, Governance Committee, Nominating Committee, Finance Committee, Audit Committee, Volunteer Services, Foundation and the CEO.***

Moved by: Geoff Griffin

Seconded by: Bob Clancey

The motion was carried.

#### 4. Other

##### 4.1 Correspondence Received up to, 2024.

There was nothing further to report for correspondence.



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

BOARD OF DIRECTORS

MEETING MINUTES

June 3, 2025

Zoom | ACR

5. **New Business**

**5.1 HSAA, LSAA, MSAA Declaration of Compliance**

The HSAA, LSAA and MSAA Declaration of Compliance documents were included in the meeting package for review. The documents indicated that there were no exceptions to declare.

There were no concerns noted by the Board.

Motion #13

*Rationale: Under the Hospital Service Accountability Agreement (HSAA), the hospital is required to declare compliance, to the best of the Board's knowledge and belief, the Hospital has fulfilled its obligations under the HSAA in effect during the Applicable Period and has delivered the required reports referred to in Section 8.6 of the HSAA.*

**Motion: The Board of Directors hereby approves the declaration of compliance, issued pursuant to the HSAA, during the Applicable Period April 1, 2024 – March 31, 2025**

Moved by: Rebecca Murphy

Seconded by: Rosaleen Cutler

The motion was carried.

Motion #14

*Rationale: Under the Long-Term Care Service Accountability Agreement (L-SAA), the hospital is required to declare compliance, to the best of the Board's knowledge and belief, the HSP has fulfilled its obligations under the L-SAA in effect during the Applicable Period.*

*Without limiting the generality of the foregoing, the HSP confirms that:*

- (i) it has complied with the provisions of the Connecting Care Act, 2019 and with any compensation restraint legislation which applies to the HSP; and*
- (ii) every Report submitted by the HSP is accurate in all respects and in full compliance with the terms of the Agreement;*

**Motion: The Board of Directors hereby approves the declaration of compliance, issued pursuant to the LSAA, during the Applicable Period January 1, 2024 – December 31, 2024.**

Moved by: Allan MacGregor

Seconded by: Bob Clancey

The motion was carried.



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

BOARD OF DIRECTORS  
MEETING MINUTES

June 3, 2025  
Zoom | ACR

Motion #15

*Rationale: Under the Multi-Sector Service Accountability Agreement (MSAA), the hospital is required to declare compliance, to the best of the Board’s knowledge and belief, the HSP has fulfilled its obligations under the MSAA in effect during the Applicable Period.*

*Without limiting the generality of the foregoing, the HSP has complied with:*

- (i) Article 4.8 of the MSAA concerning applicable procurement practices;*
- (ii) The Public Sector Compensation Restraint to Protect Public Services Act, 2010, and*
- (iii) The Connecting Care Act; 2019*

***Motion: The Board of Directors hereby approves the declaration of compliance, issued pursuant to the MSAA, during the Applicable Period April 1, 2024 – March 31, 2025.***

Moved by: Lori Morris  
Seconded by: Al Little

The motion was carried.

**6. Closed Session**

At 7:28 p.m., the Board moved into closed session.

Motion #16

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby moves into closed session.***

Moved by: Bob Clancey  
Seconded by: Lori Morris

The motion was carried.

At 8:13 p.m., the Board rose from closed session.

Motion #17

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby rises from closed session.***

Moved by: Rosaleen Cutler  
Seconded by: Bob Clancey

The motion was carried.

**7. Meeting Closing**

**7.1 Next Meeting**

The next regular meeting of the Board is scheduled for 6:30 p.m., on Tuesday October 7, 2025.

**7.2 Adjournment**

The meeting was adjourned at 8:14 p.m.



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

BOARD OF DIRECTORS

MEETING MINUTES

June 3, 2025

Zoom | ACR

---

Motion #18

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby adjourns their meeting at 8:14 p.m. on June 3, 2025.***

Moved by: Rebecca Murphy

Seconded by: Rosaleen Cutler

The motion was carried.